

NOTIFICATION OF PERSONNEL ACTION

1. Name (Last, First, Middle) KASS, DARA ANN	2. Social Security Number (b)(6)	3. Date of Birth (b)(6)	4. Effective Date 11/21/2021
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FIRST ACTION		SECOND ACTION	
5-A. Code 170	5-B. Nature of Action EXC APPT	6-A. Code	6-B. Nature of Action
5-C. Code Y7M	5-D. Legal Authority SCH C, 213.3316. AGENCY- UNIQUE SCHEDULE C AU	6-C. Code	6-D. Legal Authority
5-E. Code ZLM	5-F. Legal Authority OPM FORM 1019 DATED 11-15-2021	6-E. Code	6-F. Legal Authority

7. FROM: Position Title and Number	15. TO: Position Title and Number REGIONAL DIRECTOR, NY, NY, REGION II PD:HHS237 POSITION:00274441
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8. Pay Plan	9. Occ. Code	10. Grade or Level	11. Step or Rate	12. Total Salary	13. Pay Basis	16. Pay Plan	17. Occ. Code	18. Grade or Level	19. Step or Rate	20. Total Salary/Award	21. Pay Basis
						GS	0301	15	06	\$172,500.00	PA
12A. Basic Pay	12B. Locality Adj.	12C. Adj. Basic Pay	12D. Other Pay	20A. Basic Pay	20B. Locality Adj.	20C. Adj. Basic Pay	20D. Other Pay				
				\$128,870.00	\$43,630.00	\$172,500.00	\$0				

14. Name and Location of Position's Organization	22. Name and Location of Position's Organization OFFICE OF THE SECRETARY OF HEALTH AND HUMAN SERVICES OFFICE OF THE REGIONAL DIRECTOR, REGION NEW YORK - NEW YORK NY USA
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EMPLOYEE DATA

23. Veterans Preference (b)(6) 1 - None 2 - 5-Point 3 - 10-Point/Disability 4 - 10-Point/Compensable 5 - 10-Point/Other 6 - 10-Point/Compensable/30%	24. Tenure 3 0 - None 1 - Permanent 2 - Conditional 3 - Indefinite	25. Agency Use	26. Veterans Preference for RIF (b)(6)
27. FEGLI (b)(6)	28. Annuitant Indicator (b)(6)	29. Pay Rate Determinant (b)(6)	
30. Retirement Plan (b)(6)	31. Service Comp. Date (Leave) (b)(6)	32. Work Schedule F FULL TIME	33. Part-Time Hours Per Biweekly Pay Period

POSITION DATA

34. Position Occupied 2 1 - Competitive Service 2 - Excepted Service 3 - SES General 4 - SES Career Reserved	35. FLSA Category E E - Exempt N - Nonexempt	36. Appropriation Code 21020560	37. Bargaining Unit Status 8888
38. Duty Station Code 364170061		39. Duty Station (City - County - State or Overseas Location) NEW YORK - NEW YORK NEW YORK NY USA	

40. Agency Data	41.	42.	43.	44. PAR NUMBER:
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45. Remarks
 APPOINTMENT IS INDEFINITE.
 APPOINTMENT AFFIDAVIT EXECUTED 11-22-2021
 CREDITABLE MILITARY SERVICE: (b)(6)
 PREVIOUS RETIREMENT COVERAGE: (b)(6)
 (b)(6)

46. Employing Department or Agency DEPARTMENT OF HEALTH AND HUMAN SERVICES	50. Signature/Authentication and Title of Approving Official ELECTRONICALLY SIGNED BY: STEVEN D. CHURCH SUPERVISORY, HUMAN RESOURCES
47. Agency Code HE10	48. Personnel Office ID 1704
49. Approval Date 11/24/2021	